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Bulletin

OF THE

National Tuberculosis Association

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Vol. VI JANUARY, 1920 No. 1

$100,000 For "One-Horse" Affair

Amount Asked by Children's National Tuberculosis Society for Institution in New Mexico

[EDITORIAL NOTE:—*One of the purposes of the National Tuberculosis Association is to furnish information to the public regarding various societies and agencies engaged in, or purporting to be engaged in, anti-tuberculosis work. It publishes a directory of associations and institutions affiliated with the National Tuberculosis Association and makes available more detailed information through the Bulletin and otherwise. In response to many requests, it also seeks to supply information regarding the activities of other agencies not affiliated with the National Tuberculosis Association, such as the organization mentioned below. In view of the present demand and urgent need for contributions in connection with philanthropic enterprises, the National Association considers it its duty to supply the contributing public with the following information with reference to the Children's National Tuberculosis Society. Although the National Association does not assume responsibility for the truth of this information, it has gathered it from what it considers to be reliable sources.*]

Readers of previous issues of the BULLETIN as far back as January, 1916, may recall an account of the Children's National Tuberculosis Society, published in that issue. Additional information has now been received which may be of interest to anti-tuberculosis workers, chambers of commerce officials, and others, especially when solicitors for the Children's National Tuberculosis Society come to town. A recent letter from this Society received by the Metropolitan Life Insurance Company indicates that the Society still maintains headquarters at 35 South Dearborn Street, Chicago. Dr. Paul Burmaster is still the secretary of the organization according to the letterhead. It may not be amiss to repeat some facts concerning the past history of Dr. Burmaster as given in the January, 1916, BULLETIN. This statement was as follows:

"Dr. Burmaster was for a number of years closely connected with and associated in professional and business capacity with Dr. L. D. Rogers, formerly of the National Medical University. The National Medical University was, according to the report of the Carnegie Foundation on 'Medical Education in the United States and Canada,' by Abraham Flexner, ostensibly the medical department of the Chicago Night University, which claims departments of art, law, dentistry, pharmacy, etc. The school appears to be owned by the dean (Rogers). . . . The school occupies a badly lighted building containing nothing that can be dignified by the name of equipment. There had been no dissecting thus far (October to the middle of April), anatomy being didactically taught. Persistent inquiry for the 'dissecting room' was, however, finally rewarded by the sight of a dirty, unused and almost inaccessible room containing a putrid corpse, several of the members of which had been hacked off. . . . Recently this school has been declared by the Illinois State Board of Health as 'not in good standing.'"

"The school is not now in operation, having gone out of business following an investigation by the police authorities of Chicago, in which it is alleged a corpse was discovered buried in the back yard of the hospital connected with the school. Dr. Burmaster, according to the annual announcement of this University, was given as Professor of Eye, Ear, Nose and Throat. In another report he is given as secretary and a member of the board of directors. Dr. Rogers, in a statement to a representative of the Chicago *Herald*, published in that paper November 12, 1915, says in answer to the following question:

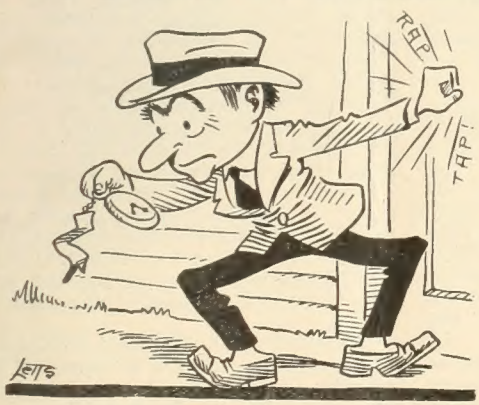
"'Was Dr. Burmaster associated with you in the National Maternity Hospital?'

"'Yes, for more than fifteen years. He used to live at my house.'

"The National Maternity Hospital was another one of the enterprises with which Rogers has been connected, and which has since been closed by the authorities. Dr. Burmaster himself is a graduate of the Hahnemann Medical College of Chicago, receiving a license to practice in the State of Illinois in 1896 and in New Mexico in 1912."

Recently an anti-tuberculosis worker living in the Southwest, visited Alamogordo, N. M., where the Children's National Tuberculosis Society conducts an institution known as Mountainair. It is claimed by the Children's National Tuberculosis Society that, "The aim of this Society is to help in the prevention of the white plague by education, using the profits from the sale of its publication and membership in maintaining our home, where worthy tuberculous children are cared for free of charge, including free transportation." The publication referred to is a monthly magazine, "Our Tuberculous Children."

(*Continued on page 2*)



April 22, 23 and 24 are the dates for the Annual Meeting of the National Tuberculosis Association. It will be held in St. Louis, Mo., immediately preceding that of the American Medical Association at New Orleans, and immediately following that of the National Conference of Social Work, both of which will also be held at New Orleans.

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Directory Changes

The following changes have been made in the directory of state associations since August of this year.

W. A. Harris has succeeded A. J. Torsleff as executive secretary of the Maine Anti-Tuberculosis Association.

Mrs. Martha O. Davis has succeeded Mrs. John M. Fulton as executive secretary of the Nevada Public Health Association. The address of the executive office is City Hall, Reno.

Dr. Ida M. Alexander has been appointed director of the North Dakota Anti-Tuberculosis Association.

The address of the Wyoming Public Health Association has been changed to 334 Citizens National Bank Building, Cheyenne.

$100,000 For "One-Horse" Affair

(*Continued from page* 1)

The visitor to Alamogordo was taken out to see Mountainair by Dr. J. R. Gilbert, who announced that he was the medical director. The visitor wrote the National Tuberculosis Association regarding his trip, and one paragraph from his letter is as follows:

"On my way out we met Mrs. C. A. Garrett, who lives in Alamogordo and is acting as matron pro tem., and three children, all the patients now in the Sanatorium, in a buggy drawn by one horse, and inasmuch as the buggy contained the entire staff and all the patients of the institution, I presume you will be safe in referring to it, if you wish, as a 'one-horse affair.'"

For this institution, the Children's National Tuberculosis Society is endeavoring to raise an endowment fund of $100,000. The above-mentioned letter from the Society to the Metropolitan Life Insurance Company says:

"We are trying to raise an endowment fund of $100,000 for our Free Home for poor tuberculous children, which we have conducted at Alamogordo, N. M., for the past six years. The institution takes free any poor tuberculous child, irrespective of creed. We also have a department for adults, caring for them at cost.

"No institution, however, can be run on a hand-to-mouth basis. We absolutely need an endowment. Will you please send us $5.00 or such amount as you feel able to, toward this fund and help those unable to help themselves? Please do not leave this letter unanswered."

From time to time the National Tuberculosis Association receives information regarding the work of solicitors of the Children's National Tuberculosis Society in various parts of the United States. Recently the Cincinnati Anti-Tuberculosis League wrote the National Association that workers selling the monthly magazine of the Children's National Tuberculosis Society came to Cincinnati and worked there for about four days, whereupon they were ordered out of the city. Other places in which solicitors have been working are Charleston, Rockledge, Fla.; Memphis, Tenn.; Houston, Tex.; Birmingham, Ala.; and many other places. The National Tuberculosis Association wishes to repeat its statement made in the January, 1916, issue of the Bulletin, that it does not endorse the Children's National Tuberculosis Society, nor does it approve or countenance its policy or methods.

National Association Board of Directors Meet

A joint meeting of the Board of Directors and the Executive Committee of the National Tuberculosis Association was held at Pittsburgh on December 4th. Among the various resolutions adopted and actions taken, the following are significant for readers of the Bulletin:

Financial Campaign for 1920

After a thorough discussion of financial campaigns for 1920, the following resolutions with regard to such campaigns were adopted:

"*Resolved,* That, for the year 1920, a Christmas seal, to be sold for one cent, be issued for the benefit of tuberculosis work; that the use of the Red Cross be continued if possible, and if this is not possible, that the double Red Cross be used.

"*Resolved,* That it is the opinion of the Board of Directors that December is the proper month for a tubercuolsis seal sale.

"*Resolved,* That if the American Red Cross does not allow the use of the Red Cross on the Christmas seal in 1920, the American Red Cross be requested to announce that the tuberculosis seal is the acknowledged successor of the former Red Cross Christmas seal.

"*Resolved,* That the Executive Office be instructed to take immediate steps to copyright, if possible, or otherwise protect the tuberculosis or double red cross."

Annual Meeting

Plans for the annual meeting, in St. Louis on April 22nd to 24th, were considered, and the following section chairmen were appointed:

Dr. George Dock, St. Louis, Clinical Section.

Dr. E. L. Opie, St. Louis, Pathological Section.

Dr. H. W. Hill, St. Paul, Sociological Section.

Miss Mary B. Gardner, Providence, Nursing Section.

Dr. A. W. Freeman, Columbus, Advisory Council.

Milwaukee Suit

Dr. Dearholt reported a situation in Milwaukee where a new organization, the Milwaukee Anti-Tuberculosis League, which is not acknowledged as a responsible agency, has issued seals in competition with the Red Cross seal, and is infringing upon the rights of the Wisconsin Anti-Tuberculosis Association. The Board of Directors adopted resolutions instructing the National Tuberculosis Association to join with the Wisconsin Association in a suit against the Milwaukee Anti-Tuberculosis League, primarily for the protection of the double Red Cross emblem.

Review Expansion

The Managing Director reported conferences with Sir Robert Philip in England with reference to extending the scope of the *American Review of Tuberculosis,* and, after discussion, the following resolutions were adopted:

"*Resolved,* That the Board of Directors express their appreciation of the suggestion of Sir Robert Philip that the plans for the *American Review of Tuberculosis* be developed so as to represent all English-speaking peoples, especially Great Britain; but that it is the opinion of the Board of Directors that the difficulties in the way of such extension make it inadvisable at present"; also

"*Resolved,* That the Board of Editors of the *American Review* be requested to consider the addition of representatives of Great Britain to the Board."

Unappropriated Funds

With reference to unappropriated and unexpended balances on hand in the treasuries of state associations on January 1st, the following resolutions were adopted:

"Resolved, That all state associations and other associations to which the National Tuberculosis Association has appropriated Red Cross funds, during the year 1919, and that shall have unexpended balances on January 1, 1920, shall be allowed to spend those balances during the year 1920, provided they submit for approval of the National Tuberculosis Association budgets indicating in detail the manner in which it is proposed to spend such money.

"Resolved, That all balances of funds supplied by the Red Cross for the year 1919 remaining unappropriated to state and other organizations on January 1, 1920, shall be transferred to the General Fund of the National Tuberculosis Association."

Advisory Committee to U. S. P. H. S.

Mr. Baldwin, Chairman of the Committee on Federal Legislation, presented a letter from Surgeon-General Blue, asking for the appointment of an Advisory Committee on Tuberculosis. In compliance with the request of the Surgeon-General, the following resolution was adopted:

"Resolved, That in compliance with the request of Surgeon-General Blue, as contained in his letter of December 3, 1919, addressed to Mr. Baldwin, an Advisory Committee to the United States Public Health Service, to consist of at least five members, be appointed by the chair to consult and advise as to the management of the tuberculosis patients now under the care of the Public Health Service; also that the traveling expenses of this committee be paid by the National Tuberculosis Association."

The President appointed on this Committee: Dr. Henry W. Hoagland, Chairman; Dr. G. E. Bushnell, Dr. H. K. Dunham, Dr. E. R. Baldwin, and Dr. W. C. White.

Regional Bulletins

In order to keep the executive secretaries in their territories thoroughly in touch with matters of interest in other states, four of the six regional secretaries of the National Association are now issuing their own bulletins. The names of the publications are as follows:

North Atlantic Chat, published by Mr. Paul L. Benjamin.

New England Echo, published by Mr. Leet B. Meyers.

Southern T. B. Exchange, published by Mr. Murray A. Auerbach.

Regional Bulletin, published by Mr. Arthur J. Strawson.

Copies of the bulletins may be secured from the regional offices upon application.

The Social Unit Plan

By Haven Emerson, M. D.

NOTE.—*The following is an abstract of a report by Dr. Emerson of the Medical work being done in the Mohawk-Brighton District of Cincinnati, where the Social Unit plan of community organization is being tried out. The report is based on an investigation made by Dr. Emerson for the National Medical Council of the Social Unit Organization. Under the Social Unit plan, the community is organized into small "blocks" of about a hundred families, each "block" or unit having an elected representative to a central community council. Various skilled groups such as physicians, nurses, etc., through self-governing councils act as a planning body for neighborhood programs and work through the "block" representatives, in carrying them out.*

At present the obvious cause of failure of even the most liberally organized and intelligently directed governmental agencies for health protection is the lack of means of approach and contact with the people who need the technical services and the education, upon which the reduction of sickness and death rates depend. The facts of cause and prevention are abundant. The technique of applying remedial measures is established. There are trained agents for the medical and allied services ready at hand, yet those who suffer most are unable with their present knowledge and lack of means of group expression to ask for the extent and quality of service which they require.

General Conclusions

It must appear to anyone who will take the trouble to inquire as to the facts from the people of the Mohawk-Brighton District, that they have had a determining voice in selecting and controlling all the health education, preventive medicine and sickness service features of the community organization. It is equally evident that once the people's representatives decided to have certain types of services, responsibility of the execution of the problem was under the control of the Physicians' Council, the Nurses' Council and the Social Workers' Council. Inquiry develops practical unanimity in the opinion of physicians of the District, that the medical needs of the district have been better met than before, that medical practice has been benefited, and that if all taint of donation of services were removed by the assumption of costs by those who are served, there would be no further reserve in the willingness to praise and approve of the organization and its results.

In view of the fact that neither the duration of the Social Unit experiment nor the size of the population unit dealt with are of such proportions as to permit of a reliable statistical foundation in morbidity or mortality data as a basis of comparison between the health of the district before and since the organization of the unit or between the health of the district and that of other approximately equivalent population groups in Cincinnati or in the city as a whole, conclusions must be based on opinion rather than upon recorded figures or work done.

The accomplishments which are tangible and serve as important evidence of a substantial improvement over the results obtained by the average or even by unusually well-administered health services in the large cities of the country are as follows:

(a) The reaching of a high percentage of all expectant mothers needing prenatal advice beyond the third month of pregnancy.

(b) Early and continuous supervision of all babies born in the district as well as adequate care for the mothers during the period immediately after confinement.

(c) Medical examination of all the children of the so-called pre-school age with the result that a high percentage of the physical defects discovered were brought under suitable corrective treatment.

(d) So far as experience goes, probably all of the active cases of pulmonary tuberculosis in the district were discovered, reported and brought under guidance, and that the cases which could safely be left in their homes received the benefit of nursing and social service direction of a high grade.

(e) Beside nursing for those unable to provide it through their own financial or home resources, treatment was supplied to the sick of the district under the direction of their own physicians.

(f) In time of emergency during the influenza epidemic, the educational and nurses' service was prompt and efficient in reaching every case and adequate care was given within the limits of medical knowledge. (This statement is made in spite of the fact that any claim of statistical proof of a lower death rate for the district was a result of the superior and more efficient nursing service given in the Mohawk-Brighton district is open to honest protest as containing fallacies due to the lack of proper controlled comparisons.)

(g) The correction of gross sanitary violations and the improvement in general cleanliness of premises has been obtained by a cooperative action through the citizens, landlords, and tenants, without recourse to police and court action.

(h) The mothers and fathers of the district have become educated to an alertness and understanding interest in the relation of health and its maintenance to their children's and their own welfare, which makes them readily accessible to teaching in these directions without recourse to extravagant and spasmodic propaganda with all its features of error and lack of porportion.

It is my opinion that extension of the services of the medical nursing and social worker groups to include periodic

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The Framingham Demonstration

No 19: Home Economics in Framingham

By D. B. Armstrong, M.D., Executive Officer

These monthly articles in the Framingham series began in July, 1918

An intimate contact with home conditions in the average American community leads to the realization of the urgent need for hygienic education regarding the essentials of home methods. This consideration is fundamental to the general health problem, even though the problem is of tremendous magnitude. From the tuberculosis point of view, it is particularly essential that the problems of home management, especially in regard to food, the practice of personal hygiene, etc., be studied and controlled.

Last month the Framingham story was about the Children's Health Camp. In this connection it was mentioned that the homes of the more needy children in the community were visited by the nurse, and a careful record made of undesirable domestic conditions. This camp work has been particularly instructive in the matter of pressing home health needs. For instance, it is found that out of a group of 50 children taken to the camp there may be as many as a half dozen who will have forgotten the taste of milk. This is a serious matter when one realizes the essential character of an adequate milk supply for the growing child. Not only is milk a well balanced and relatively cheap food, but it contains growth producers, or so-called vitamines, absolutely necessary to normal metabolism.

It is a very rare thing in such a study of home conditions to find a single family with several children taking a sufficient supply of milk to meet the minimum physiological requirements of the children. Instead of milk for breakfast, children are apt to have tea or coffee, and fried potatoes. Consequently there results much malnutrition, which is in itself a very distressing factor leading to the subsequent development of active tuberculosis.

How is it possible, in the average community, to meet this problem? Framingham is attempting to do this in several ways:

1. By a tuberculosis committee, which is a branch of the general health committee and the Framingham Civic League, it is endeavoring to reach these homes by a consistent program of educational work. This approach, through literature, news articles, etc., is supplementary to the personal visits of nurses and relief workers.

2. Through the help of the neighborhood committees previously described in the BULLETIN, an effort has been made to gather together in groups those mothers most needing, and most likely to be interested in, competent instruction with reference to food, hygiene, domestic economy, etc. In this work the Demonstration has had the active and generous cooperation of the Framingham Normal School, situated in Framingham Center. It so happens that the Normal School specializes in the instruction of domestic economy. Under the direction of an expert supervisor, Normal School students are brought in contact with the above-mentioned groups, where, in the first place, an effort is made to "get over" certain essentials through group instruction. Each interested mother is then accompanied into her own kitchen by one of the students of dietetics and home economy, where the practical problems of home hygiene and of food selection, preparation, preservation and use, are studied.

3. This group and individual instruction is supplemented by the exhibits of charts, food, etc., prepared and explained by the normal school students at advertised neighborhood meetings in school houses and elsewhere.

4. Perhaps the most practical and effective method of reaching the homes most in need of instruction and cooperation is a program worked out last year by the normal school students, in cooperation with the full-time physician in charge of the medical work in the Framingham schools, and his staff. In this work every child diagnosed by the school physician as under-nourished, and considered by him to be under-nourished for nutritional reasons, is referred to the dietetic staff. A dietitian is then introduced into the home by the school nurse, and an effort made to correct errors in diet and nutrition in so far as they affect the child. This contact with the home, of course, results in an opportunity for the dietitian to study and advise regarding the whole food problem of the family.

This method of approach to one of the most serious hazards of American life seems to offer an important channel for attack on one of the essential problems of the home. Through the influence of this work on home hygiene, it amounts also to an attack upon a serious aspect of "housing," namely that factor of living which involves the use of right living methods. It is perhaps of greater importance at this time to give attention to housing methods, than it is to the more refined factors of housing equipment.

Of course, in the consideration of equipment, each family must have the fundamental essentials for personal hygiene, for cleanliness, for an adequate food supply, etc. Given these things, what seems to be most needed is education regarding their use. The raising of human beings bears a certain significant analogy to raising milk. It is well known that a herd of cattle, housed in an old and not particularly attractive stable, but handled with the essentials of clean milk production, such as clean pails, clean hands, etc., will produce good and safe milk. On the other hand the same herd of cattle, housed in an elaborately equipped and beautiful stable, but handled with poor technique (poor methods) will produce poor and dangerous milk.

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THE FRAMINGHAM HEALTH CAMP WHICH DOES ITS BIT IN LOCATING UNDER-NOURISHED CHILDREN.

Modern Health Crusade

DEPARTMENT

Bulletin of the

National Tuberculosis Association

JANUARY 1920

National Order of the Round Table

Under the policy of a progressive program, the Order of the Round Table is to be recreated for Modern Health Crusaders. This plan for a further appropriation from the olden knighthood of arms to the knighthood of health has been worked out by the National Association in consultation with other national organizations engaged in child health work. Full explanations will be given in the new Crusade manual, which is to be published in January.

The Table Round, a subject that has captured the interest of poets, romancers and children for many centuries, will extend the Crusade's unique motivation for children from the health chores to the study of hygiene and an advanced program in health work. The new order is designed to create lively interest in physical and athletic fitness in both elementary and secondary schools, and correspondingly to lighten the task of the teachers. Participation in the program entails no organization obligations. The examinations for admission to the order are already employed in physical education in hundreds of schools.

Membership in the Round Table will be the highest distinction to be won by a Crusader. As in the Arthurian romances, a seat can be won only by the best knights. But all who demonstrate prowess will find seat, for the table will have the same power of expansion as of yore, and in the age of democracy the order will know no "nobility" except the nobility of health, physical and moral.

It is proposed to issue a handsome certificate of membership to each Crusader earning a seat at the Round Table and to provide a beautiful badge for the order. The certificate will preferably be awarded jointly by the National Tuberculosis Association and the association for the resident state, as directors of the national and state legions of Modern Health Crusaders. The badge may be purchased by the member at low cost, where the local Crusade directors lack funds to contribute it.

Qualifications

For admission to the National Order of the Round Table, the boy or girl must earn 100 points, out of a possible 195 or more, by demonstrating athletic ability, nutritional and postural excellence, by passing physical examinations, and by maintaining a high stand in health studies. The candidate must also become a knight banneret of the Modern Health Crusade before he is admitted.

MAJOR LLOYD KNIGHTS MODERN HEALTH CRUSADERS WHO HAVE JUST SLAIN THE DRAGON OF DISEASE, AFTER PERFORMANCE OF "KING GOOD HEALTH WINS," PARK VIEW SCHOOL, WASHINGTON, D. C.

Use is made of standards established by the Playground and Recreation Association of America, the Child Health Organization, the American Posture League and the American Red Cross (First Aid Division). The National Association desires to make the Round Table a means of promoting the educational propaganda of these organizations and to make the entire Crusade, as a system creating active interest in health, a vehicle for bringing to the schools improved methods of health instruction.

There are six general methods, in addition to the performance of the Crusaders' health chores, through some or all of which a candidate may demonstrate his qualifications for a seat at the Round Table. The methods and the minimum and maximum number of points that may be earned toward the required 100 points are as follows:

1. Obtaining a school mark of 85% or more in a course in hygiene requiring at least 20 minutes of class instruction per week for 30 weeks in one school year, or proportionately more minutes for a less number of weeks. 25 to 35 points.

2. Passing the athletic badge tests for boys and for girls, standardized by the Playground and Recreation Association. A sample test for boys consists of chinning, standing broad jump and sprinting; for girls, indian club or potato race, basket-ball throwing and balancing. 20 to 30 points.

3. Possessing a weight approximating or reaching the normal. Periodic weighing and instruction in nutrition after the plan of the Child Health Organization assists the candidates to meet this qualification. 5 to 30 points.

4. Passing the "triple test" for correct posture, prescribed by the American Posture League, under the conditions required for the A. P. L. gilt pin and silver pin. 15 to 30 points.

5. Passing a physical examination covering teeth, throat (adenoids and tonsils), heart, lungs, eyes, ears and feet (shoes). When an examination discloses the need of remedy, credit may subsequently be earned for correctional treatment. In a school where examination of all the parts of the body mentioned is not feasible, credits are allowed for passing an examination of some of the parts. 5 to 45 points.

6. Taking a course in first aid under a teacher and passing the examination required for the Certificate of First Aid issued for schools by the American Red Cross. 30 points.

For further explanation, including tables of standards and of credits, the reader is referred to the Crusade manual, 1920 edition.

Program to Fit Any School

The Order of the Round Table represents an advanced program most readily undertaken by those progressive schools in which time is allowed for modern instruction in hygiene, for gymnastic or athletic drill and for physical examinations. A school which does not make a practice of these things may nevertheless arrange to give its pupils the advantages of the Round Table by securing for its teachers the cooperation of a physician or nurse and the parent-teacher association or women's club.

The introduction of advanced features does not make the fundamental program of the Crusade any less simple. A one-room school in which time is allowed only for old-line teaching of the "three r's" may still enlist its children as Crusaders. The overworked teacher need only explain the chores and the rewards earned by Crusaders, and instruct the children to take the folders home. There the parents become assistants to the teacher in the most direct form of hygienic instruction. The teacher's work in examining the folders —records of home work—no oftener than once in from two to five weeks is nominal, her task is lightened by the improvement in her pupils, and she is rewarded by the new interest taken by parents in the school.

A school need not take up any more of the Crusade program than the performance of health chores for such number of weeks as it elects. On the other hand, the school that wishes to give practical health education a place commensurate with other branches of teaching will find in the full Crusade program a progressive series of inducements to the pupils.

The boy or girl who does the health chores for fifteen weeks passes successively through the ranks of page, squire, knight and knight banneret. In the school which extends the régime of chores over twenty or thirty weeks, Crusaders have an opportunity to become knights and knights banneret, advanced order, with the privilege of wearing the chivalric colors.

All schools carrying on Crusade work for fifteen weeks in a school year are eligible to compete in the National Tournament in Health Knighthood. Experience has shown that a school's participation in the tournament markedly increases the interest of the children in performing their hygienic duties, and implants in them a pride in their school's record, thus cultivating a feeling of community responsibility.

A school that constitutes its pupils a Crusaders' club still further enlists the active interest of children in personal and public health. A school or class that adopts the club organization described in the Crusade manual can readily undertake a campaign of community sanitation for school yards or for the whole community. A school that meets the simple requirements for formal membership in the state and national legions of the Modern Health Crusade will stimulate its pupils to give their support to public health movements throughout the state and nation.

In the Round Table the Modern Health Crusade offers its highest inducement to the individual Crusader for physical improvement. It offers membership in a select group representing the entire nation, but limited to those Crusaders who demonstrate an excellence in physical education far beyond the requirements for general membership in the Crusade.

THE PEOPLE'S CRY FOR HELP IN "KING GOOD HEALTH WINS," PARK VIEW SCHOOL, WASHINGTON, D. C.

February Meeting

The subjects for February, "Fake cures and real medicine; fresh air, wholesome food, exercise, rest; methods of outdoor sleeping," are good material for a lesson on the wisdom of striking directly at the root of any trouble. As these subjects lend themselves well to dramatic presentation, it is especially desirable that they be featured in an intertainment to which parents may be invited.

Miss Fresh Air or *David and the Good Health Elves* are playlets that serve admirably to drive the lesson home. Copies of *Miss Fresh Air,* for eight characters, may be secured from the National Association for ten cents. *David and the Good Health Elves,* a somewhat more elaborate playlet, requires twenty-eight children, some of whom take part only in the dances. Copies for the fifteen speaking parts may be secured for 18 cents.

A new pageant has been devised especially for the February meeting, *Fake Cures and Health Fairies.* Expensive costuming or stage settings are not required, but the children may be dressed to represent the parts in so far as resources are available. The pageant may be given practically in pantomime, following the directions published here, or parts may be written to carry out the idea of the action. The crusade master may stimulate interest by holding a contest for the writing of speaking parts. If, however, the pageant is given in pantomime, with the exception of announcements by the heralds, attention must be concentrated on the acting.

The Pageant

The curtain raises upon *Disease,* represented by a large boy, who occupies the center of the stage. His attire and make-up suggest something sinister. His face and hands are darkened, and he stalks about, brandishing a huge club and muttering to himself.

From left stage enters a *Herald,* who taps thrice with a stick and calls "Cough Cure!" *Cough Cure* enters from left stage. Like all of the *Fake Cures,* he wears about him a large sheet of cardboard or a desk blotter, to simulate a bottle. Garish signs on front and back proclaim his name and powers, and are carefully displayed to the spectators. The other Fake Cures are summoned in turn, as *Pink Pills, Dr. Druggem's Dope, Spring Tonic, Killorcurem, Wonderworker, Hotstuff,* etc. When all have arrived, the *Herald* taps loudly and cries, "Lay on, my men, and rout Disease!"

The *Fake Cures* turn and make short, unconcerted dashes toward *Disease,* menacing him violently. They are, however, greatly hampered by the bottles, and *Disease* regards their efforts with

contemptuous laughter. As some of the Fake Cures approach fairly close to *Disease,* he retreats a few steps, only to bound back to his place, as defiant as ever.

The conflict is at a deadlock, when from right stage enters a *Herald* who blows a merry blast on his trumpet and summons the *Health Fairies,* calling each in turn by name. They enter, one by one, from right stage. They may be dressed to suggest the parts, but the acting is of most importance. *Fresh Air* rushes about with floating streamers; *Sunshine,* in yellow, dances around *Disease; Wholesome Food* produce from a basket a bottle of milk, a loaf of bread, fruit, vegetables, etc.; *Water* pours water from a glass pitcher into a tumbler, quaffs it and repeats the performance; *Exercise* bounces a ball; *Cleanliness* wields a huge cake of soap, toothbrush, etc.; *Cheerfulness* sings or whistles, while *Rest* waves a magic wand.

At the coming of the *Health Fairies,* the Fake Cures in consternation gradually exit backward. The Fairies occupy both sides of the stage. *Disease,* finding himself a stranger in this joyous throng, at length departs gloomily, with many a backward look. The *Herald* sounds a triumphant note and summons *Health,* a beautiful girl in white, who takes the center of the stage. The Fairies draw near, acclaiming her, while from both sides of the stage enter Crusaders, singing a lusty paean, the Crusaders' Song.

Accolade

Thousands of children enrolled in the Crusade of 1919-20 have earned or will soon earn the title of knights. The lesson of the Crusade will best be remembered by the children in schools which confer the degree with ceremony. The following accolade, originally written by Major B. J. Lloyd, has been employed in many parts of the country. The ceremony will be heightened by the use of white capes and bristol board helmets. A simple pattern for making the helmets from stiff paper is printed in this BULLETIN.

* *

For the accolade the candidates are assembled in one room or in an open space out of doors. If they represent more than one class (Crusade club) they should be grouped by classes. The schoolmates of the candidates may be assembeld to witness the ceremony, but should be kept in a separate group.

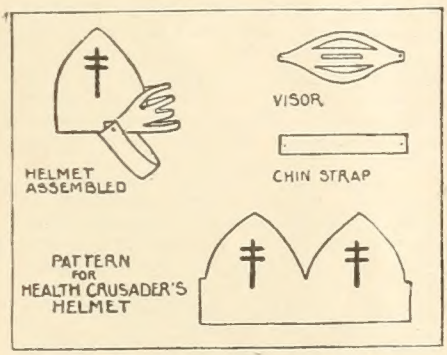
The ceremony is conducted by the principal (league master) and teachers (crusade masters). The superintendent (grand master of the league) or any prominent adult elected an honorary Crusader, may take the place of the principal in the ceremony. One, two or three children from each class are chosen to receive the sword blows of the accolade for all the candidates. They should be the captain, lieutenant and herald, provided these officers have earned knighthood.

If there is but one school class or ungraded school, the teacher, in the absence of the principal, may take his part, while the chosen pupil (preferably captain) gives the responses for the Crusade master. If the number of candidates is small, the blows may be given to each one, and not to their representative.

IN HELMET AND CAPE, READY FOR BATTLE AGAINST MAN'S ENEMIES.

Pattern for Helmet

The pattern for a health crusader's helmet, to be used on all occasions when the health drive is featured, is very simple and can be easily made in a seat work period. The material is stiff paper, preferably gray, put together with paper fasteners. No paste is needed. The following dimensions make a helmet of correct size for the average intermediate grade child: Helmet 22 by 11 inches, visor 16 by 5½ inches, and chin strap 16½ by 2½ inches. After the helmet is cut and put together the insignia of the organization for the prevention of tuberculosis may be painted in red.



HOW TO MANUFACTURE A CRUSADER'S HELMET.

Order of Ceremony

I. Singing of a Modern Health Crusade song.

II. The league master (principal) occupies the center of the stage. He carries a sword, real or wooden. If a sword cannot be obtained, a small American flag may be used. Between the league master and the candidates stand the crusade masters, each facing partly toward the league master and partly toward her group.

LEAGUE MASTER: Hail! Whom bring you here?

FIRST CRUSADE MASTER: True and loyal workers, sir; candidates for knighthood.

LEAGUE MASTER: And you, my sister, who are these who follow you with such good will?

SECOND CRUSADE MASTER: True and oyal workers, sir; candidates for knighthood.

(The league master makes similar inquiries of the other crusade masters, who reply in turn.)

LEAGUE MASTER (addressing the candidates): What is the quest which you will seek if created knights?

CRUSADE MASTERS (in unison): Our quest is happiness, both for others and ourselves.

LEAGUE MASTER: In truth you are ambitious. Have you brought silver and gold to exchange for your precious boon?

FIRST CRUSADE MASTER: Nay, nay, sir. Silver and gold have we not. We know that happiness is not purchased with silver and gold.

LEAGUE MASTER: You have well said. What then have you with which you hope to obtain happiness?

FIRST CRUSADE MASTER: Three things we bring: clean bodies, clean minds and kind hearts.

LEAGUE MASTER (to other crusade masters): And you?

OTHER CRUSADE MASTERS (in unison): We bring the same, sir; clean bodies, clean minds, and kind hearts.

LEAGUE MASTER: Now indeed I do perceive that you bring offerings more worthy than silver, gold or precious stones. A kind heart cannot live in the same body with a foul mind, nor can kind hearts and clean minds comfortably dwell in any but clean bodies. Squires, you are already on the way to happiness. Follow the straight and narrow path of Modern Health Crusaders. Be on your guard against that demon of unhappiness—disease. If you observe the Crusader's rules of health you will rob this demon of many of his terrors.

Tell me now, my sisters, are you sattisfied that these candidates have each faithfully performed their health chores and kept their records for the time required for knighthood?

CRUSADE MASTERS (in turn): We are.

LEAGUE MASTER: Give heed, my true and loyal workers, and receive the investiture of the order.

(The representatives of each group in turn come forward on signal by the league master and kneel on one knee or stand with bowed head before him. The league master then lightly taps each

representative with the flat of his sword three times in the right shoulder).

League Master: Squires of the Modern Health Crusade, by the authority of the (name of state) Legion of Modern Health Crusaders I do now create each one of you a Knight Crusader and invest you with the honors of the order. May you grow in the knoweldge of health and be always found fighting our common enemy, Disease.

The crusade masters now come forward one at a time and receive from the league master the silver pins. The representatives return with them to their groups.

III. When the degree has been conferred upon the last group, all again sing a Modern Health Crusade song. The crusade masters afterward distribute the pins.

Knights Banneret

The ceremony for knights banneret is the same as for knights, with the following changes: The league master addresses the candidates as "sir knights" instead of "squires." The sword blows are two, one on the right shoulder and one on the left.

To add to the occasion a Modern Health Crusade flag may be unfurled after the title had been conferred on the knights banneret. The league master summons them to come forward, saying, "Arise, chevaliers of health, to receive your standard." The flag is preferably square and of royal purple, in true form for the medieval knight banneret. The inscription, like "Modern Health Crusaders of School Five," may be made with letters in knighthood red.

If the flag rite is also added to the ceremony for knights it may be the pennon of the knight of old. Two triangular strips of knighthood red sewed pendant from the square field of a royal purple make a knight's pennon. This same flag may be used at the investiture of knights banneret. At the unfurling then, the pendants are to be ripped off, following classic usage, and a gold or purple fringe may be pinned in their place, thus indicating the advance of knights to knights banneret. Where flags are used to do honor to pages and squires, the correct colors are baby blue and corn yellow, respectively. The squire's flag is the pencel, a long narrow triangular pennant. All flags remain in the custody of the principal.

Crusade Incorporated in Studies

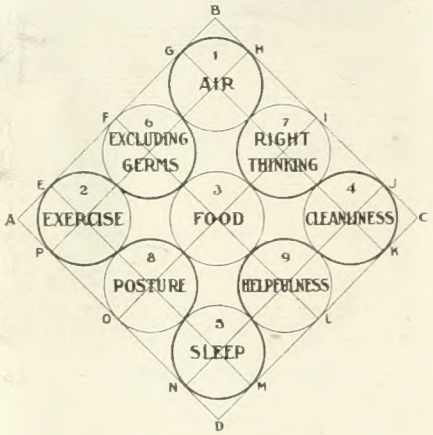
Indiana makes good her reputation as a leader in school systems by making the Modern Health Crusade a part of the curriculum in the elementary schools. The details of requirement are being worked out too late to be incorporated in the printed manual prepared by the state board of education for 1919, but the board states that if the tuberculosis association will provide the schools with full instruction they in turn will request every teacher to make the "health chores" a requirement of the physiology and hygiene department. This will mean thousands of letters of instruction, about 20,000 crusader manuals, several hundred thousand chore folders, and "Field of the Cloth of Gold" circulars.—*Hoosier Health Herald.*

Symbol of Health Principles

(A letter to be read to Crusaders by their teachers or posted in schoolrooms. The cross and diagram with nine complete circles should be drawn on the blackboard.)

Modern Health Crusaders:

The letter to Crusaders in the October Bulletin explained why the new cross designed especially for the Modern Health Crusade is called a cross of nine circles. In that letter I asked who of you could write the best directions, with a diagram, for drawing this cross. We will now give you a set of directions.



It would be interesting to know how closely your directions for solving this little draughtman's puzzle come to ours.

Each of the nine circles stands for a health-building principle, and the chores and living rules of Modern Health Crusaders are based on these principles. We want you, while having the fun of drawing the cross, to learn these principles as health guides for life. By writing in each circle the words written in our diagram on this page, you will impress these principles on your mind. Remember the position of each circle as numbered and learn to write the words in order, from one to nine. In this letter, below the diagram, we give a list of the words with some others added to make the principles more clearly understood.

Directions

Draw a perfect square, turned up on a corner like a baseball diamond. This is figure ABCD in the diagram on this page. Divide each side of the square by five points into six equal parts. This is easily done if you draw each side six inches long by your ruler. Draw with care the lines em, fl, gk, ph, oi and nj. Using each point where these lines cross as a center, draw a circle with a pencilled compass, making the radius just one-sixth of a side of the square. The circles are the nine circles of the Cross of the Modern Health Crusade.

The heavily shaded curved lines in the illustration make the boundary of the cross. Five of the circles are within the cross. The other four circles are without, but parts of their circumferences are required for the boundary of the cross.

Diagram

The principles with which the circles are labelled are here listed, somewhat expanded:

1. *Fresh Air*
   Breathing air in open circulation.
2. *Exercise*
3. *Good Food*
   Right quality and quantity of food and drink. Thorough chewing. Nothing injurious to enter the mouth.
4. *Cleanliness*
   Washing, bathing, teeth-cleaning, elimination, neatness.
5. *Sufficient Sleep*
6. *Excluding Germs*
   Striving to keep disease germs from entering the mouth and nose; "Guarding the doors." Periodical examinations.
7. *Right Thinking*
   Cheerful and clean thoughts.
8. *Correct Posture*
9. *Helpfulness*
   Protecting others from infection. Good turns.

Now, there is a useful game that may be played with the Cross of the Modern Health Crusade, beside the puzzle of drawing it. After you have drawn it and written in the principle with which each circle is named, mark in each circle the number of the Crusaders' chores that apply to the circle, or, in other words, that are covered by the principle. Very evidently chore 6, "I played outdoors or with windows open more than thirty minutes to-day," should be marked in circle 2 (exercise). It should also be marked in circle 1 (air). In one of the circles "chores 1, 2, 4, 9, 10 and 11" should be marked. Which circle is it? Only one part of chore 9 and of chore 10 apply to this circle. In all of its parts, chore 10 (standard edition of chore folder) applies to four circles and should be marked on the four.

We want lots of games in the Modern Health Crusade. They make the battle easier, the battle against disease that you Crusaders are waging. I wish that you would write me about any new game that you think will help interest boys and girls in health.

Charles M. DeForest.

The Social Unit Plan

(*Continued from page 3*)

examination of children of school age, of the adult population and particularly of those engaging in hazardous trades and industries in groups too small to justify medical services at the hands of individual employers, as well as the inclusion of education and diagnostic service, for mental diseases and for venereal diseases in the program would be desirable and profitable for the people of the Mohawk-Brighton district. Furthermore, in order that a still wider range of professional services be available for council, for service and for specialist consulting advice and for the sake of including a sufficient size of population to permit of reliable statistical comparison of results, I believe it to be of the utmost importance to plan an early and considerable expansion of the district under organization, preferably up to a population unit of 100,000, but certainly at least up to one of 50,000. The asset which an organized, readily approachable, interested and self-informed group of people presents to the practitioner of medicine and to the health officer in their respective fields is of greater value from an educational point of view than can be expressed in terms of mortality or morbidity rates.

In common with other students of the Social Unit plan and after conference with them I have recommended that a committee be created in the field of medical practice and preventive medicine to act in an advisory capacity to the Social Unit experiment and to study the whole community organization, and that such a committee should be affiliated through a paid executive with other advisory committees in the other fields of social efforts and that the deliberations and conclusions of such a group of advisory committees should be given wide publicity among the respective groups in the country at large.

The following statement of fact and the opinions expressed are based upon study of the reports and official records of the Social Unit work program and plans and upon a personal investigation of the conditions as they existed in the Mohawk-Brighton district in Cincinnati in August, 1919, supplemented by conference with evaluators, who had at other times during the summer of 1919 visited the district to study various other services contributing to the health of the community.

The Mohawk-Brighton district of Cincinnati lies in the center of a section of the city whose population is largely industrial. It contains approximately 12,000 residents. The population is divided fairly between Protestants and Catholics. In February, 1919, there were 1447 foreign-born residents.

District

Area—167 acres or .261 sq. m.
Pop.—12,000 approximately.
Density of pop. per sq. mi.—45,900, or per acre 71.8.
Nativity—Of the 1447 foreign-born

(*Continued on page 12*)

Occupational Therapy

This column of the BULLETIN is conducted in connection with the Medical Service of the National Association, which maintains an Advisory Service on Occupational Therapy. It is designed to keep the tuberculosis worker informed regarding the development of occupational therapy in the treatment of the disease and to offer suggestions for the vocational training and economic rehabilitation of the tuberculous patient. Readers are invited to send in contributions which will be helpful to workers in the field. Good, clear photographs of patients in various occupations will be particularly welcome. Address all correspondence to the Institutional Secretary.

PATIENTS AT THE BOSTON CONSUMPTIVES' HOSPITAL ARE TAUGHT THE ANCIENT ART OF CANING CHAIRS AS A PART OF "TAKING THE CURE."

It is significant that in a "General Resumé" of his report of the year's work, from a medical standpoint, of the Barlow Sanatorium Association, Los Angeles, Cal., Dr. E. T. Shields, the resident physician at the Sanatorium, gives first place, in a series of recommendations, to occupational therapy. We quote from the annual report as follows:

"This past year's work, experimental to a certain degree, has more clearly defined future possibilities in the work, and I believe increasingly gratifying results would follow the carrying out of the principles noted below:

"First—Suitable occupational therapy for practically every patient, always bearing in mind that the ultimate and only justifiable objective should be to make him, as far as possible, self-supporting and independent.

"Second—The necessity of a simple but efficient 'follow-up' system, so that no patient is ever lost sight of after he has once been located and recognized as tuberculous.

"Third—The necessity and advantage in many cases of home treatment. When proper supervision is given, good results are bound to follow, provided the intelligent cooperation of the patient and his family is secured. Ex-tuberculosis patients, properly trained in sanatoria, might be used to advantage in visiting these home-supervised cases.

"Fourth—The opportunity of a more vital correlation between all existing forces at work in the field to-day. Such efficient cooperation would go far toward solving the difficult problems we are now facing in the work of preventing and treating tuberculosis."

Occupational Therapy at "Healthwin"

The St. Joseph County Tuberculosis Hospital, near South Bend, Ind., better known under its optimistic name of "Healthwin," has introduced occupational therapy for its patients. Basketry, bead work, rug making, toy making, art work, and knitting are some of the activities that have already been taken up. In addition to these, the institution is conducting classes in typewriting, shorthand, telegraphy, and English, some of which may be made directly vocational as well as therapeutic.

The funds for carrying on the work are secured through the cooperation of the Anti-Tuberculosis League of South Bend and the Red Cross, the former organization caring for civilian patients and the latter for ex-service men.

Gardening for Patients

Every sanatorium offers a beginning for occupational therapy work in its garden. At the State Sanatorium, Wallum Lake, R. I., the care of the sanatorium garden during the summer months is left largely to the patients of the institution. The work is, of course, carried on under the direction of the physician in charge.

Suggestions from the Field

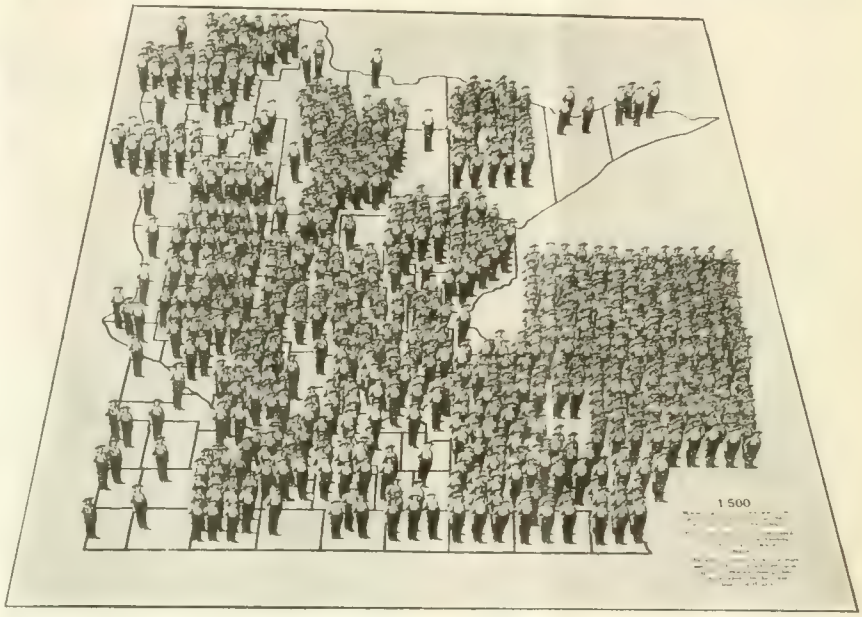
This department of the Bulletin is conducted in connection with the Loan Service Bureau of the Publicity Department. It is designed to give valuable suggestions regarding new lines of work or new methods originated or successfully used by tuberculosis associations throughout the country. Tuberculosis workers are invited to send the National Association Bulletin Editor all information suitable for publication in these columns.

Illustrating Statistics

Figures are usually dry reading to the average layman, and unadorned statistics rarely stir the imagination of the casual reader. Consequently, those who wish to impress a lethargic public with an important fact are obliged to resort to various types of embellishment to make their point strike home.

This is how the Minnesota Public Health Association made the people of the state realize the full meaning of the words, "1500 Minnesota men rejected in the draft because of tuberculosis." On a large map of the state were placed small tin soldiers, distributed over the various counties in accordance with the government list of rejects. Each man represented a case of tuberculosis lost to the fighting power of the nation because of a preventable disease.

The Minnesota Association's idea of "putting across" statistics is well worth remembering, for it may be effectively used in an exhibit or for window display purposes.



AN EXCELLENT EXHIBIT IDEA USED BY THE MINNESOTA PUBLIC HEALTH ASSOCIATION TO SHOW THE LOSS IN FIGHTING STRENGTH CAUSED BY TUBERCULOSIS.

Editorial Contest

Publicity is the one great need of the tuberculosis campaign—first to acquaint the people with the facts of the disease, and, second, to arouse overwhelming public sentiment in favor of its eradication. And if properly managed, much effective publicity may be secured at a comparatively small financial outlay.

An "editorial contest" recently conducted by the Colorado Public Health Association, offers an excellent suggestion for securing effective and inexpensive publicity for necessary health work. The contest was open to any publisher, editor or writer in the state. One hundred dollars in prizes was offered for the best editorials on the need and opportunity of public health work in Colorado. Contestants were permitted to send in as many editorials as they wished, but the rules provided that the articles must be printed in some Colorado publication by a given date.

Announcements of the contest were sent by letter to every editor in the state and by news stories directed to all Colorado publications. In addition, two special numbers of "The Crusader" brought the contest before school teachers, superintendents and principals.

The prize money was presented to the Association by a prominent lawyer who, at the time, was anxious to receive personal publicity throughout the state.

Commerce Association Cooperates

How tuberculosis work may be successfully tied up with other branches of health work was recently shown in Minneapolis, by the cooperation between the Civic and Commerce Association with the Anti-Tuberculosis Committee. Closely following a much advertised "no accident" week, the Civic and Commerce Association distributed for the Anti-Tuberculosis Committee large quantities of a special bulletin advocating the physical examination of industrial employees.

Send for This

The Red Cross seal campaign has brought out a good deal of excellent publicity matter, but decidedly one of the most attractive booklets produced for the drive is one published by the Wisconsin Tuberculosis Association entitled "A Really, Truly Christmas Tree." We recommend it as an example of what can be done with a comparatively small outlay of money.

The booklet is five by six and three-quarter inches in size, and is printed in two colors. The harmony of type, paper stock, illustrations and color are well worth studying carefully.

Advertising Leaflet

Short, concise and to the point is a little leaflet published by the Florida Anti-Tuberculosis Association and used during the seal drive. It states briefly what the association has accomplished during 1919, and a map of the state shows how many counties have been organized for tuberculosis work. The last page gives a short account of the number of deaths and resultant economic loss caused by tuberculosis.

The leaflet would make an effective enclosure during a membership or other campaign. One criticism which may be made, however, is that the double red cross used on the map is not of standard proportions, nor does the name of the Florida Association appear on the leaflet.

T. B. Cross as Poster

Let us advertise our emblem! Too much cannot be said regarding the importance of teaching every man, woman and child the meaning of the double barred red cross. Let the sight of it flash instantly into the mind of all who see it, the words, *"Destroy Consumption!"*

The New Hampshire Tuberculosis Association has made excellent use of the cross. During the Red Cross seal campaign, Dr. Robert B. Kerr, executive secretary of the Association, included among his posters a simple 24-inch double barred red cross printed on white stock. The only printing which appeared on the poster was the name of the New Hampshire Tuberculosis Association. It was used in the windows of the leading shopping districts throughout the state and aroused so much curiosity and interest that it was considered the most effective poster used by the Association during the campaign.

With Scissors and Paste

The irregular snip, snip of several dozen pairs of gleaming shears was the only sound that could be heard in the usually buzzing class-room, as the children cut out gaily colored pictures and mounted them on a heavy bristol board. Occasionally a dull thump indicated that another "cut-out" had been fitted into place. *The children were making health posters.*

Following a suggestion made by Mrs. K. R. J. Edholm, executive secretary of the Nebraska Tuberculosis Association, the teachers of McCook, Neb., set their Modern Health Crusaders to work making posters. Colored magazine advertisements and druggist advertising matter were cut out and mounted, and the finished products of this inexpensive process were health posters of unusual beauty. In Beatrice, Neb., the children cut out letters from different colored papers which they formed into titles. Pictures and slogans in regard to food and health habits cut from advertisements were pasted underneath. Here the posters were sold and the proceeds used to purchase tooth brushes and tooth paste for children who could not afford to buy them. Copies of the posters will also be used by the Nebraska Association as part of a crusader exhibit.

One of the chief values of this type of poster work is that any child can make one, as it requires no knowledge of the use of paints and brushes.

Mayor Opens T. B. Hospital

Is there a new municipal hospital in process of construction in your town? Or is one being planned? If so, this is your opportunity to interest "the powers that be" in the political world in the wisdom of turning the new institution into a tuberculosis hospital.

Because of his "interest in the tuberculosis movement" the Mayor of Trenton, N. J., recently agreed to open a newly-completed hospital to the treatment of tuberculosis patients. Health Week was chosen as the most fitting time for the occasion. The hospital was built as one of a municipal group and has a capacity of 130 beds.

This is the sort of result which speaks of a good offensive on the part of tuberculosis campaigners.

Foreign Language Poster

In order to "sell" the Red Cross seal campaign to the industrial workers of the state, the Massachusetts Tuberculosis League issued a poster which told not only in English but in four foreign languages what the Association does with the funds derived from the sale of seals. To those who do not understand the meaning of the words "tuberculosis" and "consumption," the terms "the Con," "T. B.," and "White Plague" are perfectly familiar, and these appeared on every translation.

The poster was widely distributed in the industrial plants of the state.

MORE THAN 200 PINTS OF MILK ARE SERVED DAILY TO UNDERNOURISHED SCHOOL CHILDREN BY THE HUNTINGTON COUNTY ANTI-TUBERCULOSIS SOCIETY OF INDIANA.

Milk Lunches vs. Malnutrition

As an important part of its preventive work, the Huntington County Anti-Tuberculosis Society is furnishing morning and afternoon milk lunches to school children. It was found, after investigation, that as many children of well-to-do parents suffered from malnutrition and anæmia as those of the poor, and in order to help them build up a physical resistance to tuberculosis, the Society, in cooperation with the school authorities, introduced the mid-session school lunches. The gain in weight and strength in the children has so encouraged the Society that it is planning to extend the work into the high schools next year if possible.

The milk is furnished free of charge to children who cannot afford to pay for it, and well-to-do parents of children who need the milk are requested to pay a small amount weekly. More than 200 pints are served daily.

The work is producing excellent results. The question arises, however, whether the same expenditure applied to educational and organization work might not, in the long run, produce still greater preventive results.

Virginia Influenza Campaign

The anticipated influenza epidemic has not occurred so far, but if it should still reach us, it will find a great many of our communities thoroughly prepared to combat it. Influenza campaigns conducted by tuberculosis associations throughout the country have educated the general public in the treatment and prevention of the disease as perhaps nothing else could.

An influenza campaign which should offer helpful suggestions to workers elsewhere has just been concluded by the Virginia Tuberculosis Association. The state was first divided into sections so as to thoroughly cover every county and to prevent duplication of effort. About 150,000 leaflets and 40,000 health placards, furnished by the state board of health, were distributed broadcast by a staff of two field directors and four nurses. Churches, schools, colleges, civic leagues, boards of health, the post office department and all other available channels were utilized in the distribution of this material.

A successful feature of the campaign was a poster and rhyme contest which was open to all boys and girls under eighteen years of age. Prizes of $15.00, $10.00 and $5.00 were offered for the best rhymes and posters illustrating the two rules of the State Board of Health Influenza placard. The rules are as follows: "Whenever you cough or sneeze, bow your head or put a handkerchief over your mouth and nose," and "Don't put in your mouth fingers, pencils, or anything else that does not belong there, nor use a common drinking cup."

New Arizona Publication

"The Health Prospector" is the title of a new monthly publication of the Arizona Anti-Tuberculosis Association, which is to inform those interested in the development of the tuberculosis campaign what the State of Arizona is accomplishing. Copies of "The Health Prospector" will be sent free of charge to anyone wishing to be placed upon the mailing list.

"Beating" the Strike

The printers' strike has kept many schools from starting crusade work on time this fall, through inability to secure material. But the Emery school at Williamsport, Pa., refused to mark time instead of chore folders, and with the help of the teachers made their own score cards. The strike is now a thing of the past and practically all belated shipments have been made in the National Asso'n.

The Social Unit Plan

(*Continued from page 9*)

1242 were born in Germany, Rumania or Hungary.
128 colored people in 43 families.

Cincinnati

Area—4589 acres or 70.4 sq. mi.
Pop.—414,248.
Density of pop.—5,800 per sq. mi., or 9.2 per acre.
Nativity — 56,859 foreign-born, 43,413 colored people in Cincinnati as a whole.

Thus we see that the percentage of foreign-born in the Mohawk-Brighton district was 12%, whereas for Cincinnati as a whole, it was 13.7%. For the Mohawk-Brighton district, the percentage of colored people was 1.1%; for Cincinnati as a whole, 5.4%. Comparison by age groups reveals no essential difference between the population of the city as a whole and the population of the Mohawk-Brighton district. The Mohawk-Brighton district is a mixed residential, small business and factory district with paved streets, with water carriage sewage and storm water system, and a good water supply with the rest of the city. The canal, which traverses one end of the district, is a potential source of nuisance from offensive odors and from exposure of floating fecal deposits to fly carriage. Careful research and inquiry failed to give evidence of mosquito-breeding in the canal. The smoke nuisance is of aesthetic importance rather than sanitary. Garbage collection is usually in metal-covered cans and removal is in covered wooden wagons, at sufficiently frequent intervals, twice a week except in unusually hot weather when offence results on days when collection is omitted.

Manure is allowed to collect in some premises and fly-breeding is excessive at these places, which are, however, rare, as are the few premises where pigs and chickens are kept in an unsanitary manner.

Housing on the whole is good, there being no important degree of overcrowding with the exception of a few tenements on one street. The buildings are generally low and often separated with front and rear spaces, the streets being of good width. The back alleys are often offensive from the remaining catch basins and privies, which, however, are being steadily reduced by health action.

No private wells or water supplies are recorded. The only offensive trade in the district is the slaughtering of cattle, which is carried on with only local nuisance from smell within short distance from the plant.

Food distribution and sale in stores or eating places is under inspection and grading, with the result that the industry appears to be carried on safely for the consumer. There is no systematic medical supervision of food handlers.

The area of the district is, except for a small steep hillside, low and flat, with considerable dampness in winter, but with a good surface drainage. Ponding of water does not occur. Conditions are similar or better in most parts of Cincinnati, but certain densely congested areas of colored population present serious over-crowding to a dangerous degree, which does not occur anywhere in the Mohawk-Brighton district.

The medical, nursing and social services supplemented by verbal and printed educational propaganda in the subjects listed which properly come up for consideration were initiated on the following days as a result of action by the general and occupational councils:

Infant Welfare	Dec. 17, 1917
Prenatal Care	Feb. 1, 1918
Maternal Services	Apr. 1, 1918
Pre-School Examinations	Apr. 8, 1918
Tuberculosis Supervision	Apr. 8, 1918
General Medical Examinations	Nov. 1, 1918

Medical services are directed by the medical council composed of 26 of the 38 physicians living or practicing within the district representing the local medical profession through a paid executive selected by the physicians group. Sixteen of these physicians are employed on part time at $3.00 an hour, in professional work, examining children and adults at the Center. Rarely and only in emergencies is treatment given by these physicians at the Center. The care of the sick is not considered to lie within the province of the services so far called for by the Citizens' Council. Private hospital or dispensary care is arranged for as need arises and the individual case demands. The family physician is always informed if any need for treatment is discovered in one of his patients. Full freedom of personal choice of physicians is scrupulously protected and encouraged.

The Social Unit physicians do not do school medical inspections. All physicians employed in preventive work are selected by a committee of the medical council which is re-elected every two months. The medical executive is now giving about five hours a day to the work. No physicians' visits are made to the homes even of the needy, this service being provided by the district physicians of the health department.

The field work in homes is done by six nurses and a nurses' assistant. Each nurse serves all nursing needs in her district, whether prenatal, maternal or infant care, tuberculosis or general sickness, but she does not supervise or control the acute communicable disease nor does she take part in school nursing. All nurses serve all nursing functions, and are trained in special types of services by the supervising nurse, or by others with special experience and from without the district.

The Framingham Demonstration

(*Continued from page 4*)

This analogy is more or less applicable to the human problem. Where we need the emphasis at the present time is on methods. There is certainly more danger to others in a filthy person in a palace than in a clean person in a hovel, providing the hovel offers a minimum equipment for personal cleanliness.

It would seem that this practical method as developed in Framingham for reaching the homes, which involves the utilization of available equipment for education, would be applicable elsewhere, either independently or associated with other public health activities such as infant welfare work, school hygiene, tuberculosis nursing, etc.

NOTE.—*Several publications are now available at the Community Health Station and may be had at the rate of 5 cents a copy. Diagnostic Standards in Tuberculosis; Monograph No. 1, The Program; Monograph No. 2, The Sickness Census; Monograph No. 3, The Vital Statistics of Framingham; Monograph No. 4, Medical Examination Campaigns; Monograph No. 5, Tuberculosis Findings; Monograph No. 6, Framingham Schools and Factories; the Report of the Framingham Appraisal Committee. Address orders to Community Health Station, Framingham, Mass.*

Alabama Tuberculosis Bill

After seven years of untiring labor, tuberculosis workers of Alabama are now able to realize one of their greatest ambitions. A State Tuberculosis Commission has been created by act of legislature, carrying with it a provision for the erection and maintenance of tuberculosis hospitals under its supervision.

The first wave of elation being over, the Anti-Tuberculosis League mapped out a brief but comprehensive program for 1920, the twelve points of which read as follows:

1. **Help the Children.** It is in childhood that the seeds of tuberculosis are sown. Teach hygiene by the Modern Health Crusade method.
2. **Work for Better** housing and feeding and living conditions, at home and in school.
3. **Watchfulness of Children** who show any signs of consumption. Open-air schools for suspected cases.
4. **An Anti-Tuberculosis Association** in every county and large town.
5. **Supervision** of returned soldiers found to have tuberculosis.
6. **Preventoria** for anæmic children with inadequate home care.
7. **A Visiting Nurse** to reach every tuberculosis patient, so as to cheer the patient, instruct the home, promote recovery and insure safety.
8. **Training** in healthful occupations of persons recovering from tuberculosis.
9. **A Traveling Dispensary,** with doctor, nurse and exhibit, to reach remote districts.
10. **Free Expert Examinaton** of all needy cases of suspected tuberculosis.
11. **Promotion of Hospitals** at public expense, to care for advanced and dependent cases of consumption.
12. **A Sanatorium** available for all early cases, however poor, however proud.